ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NOS.:	
ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SA	AN DIEGO
JUVENILE COURT ☐ 2851 MEADOW LARK DR., SAN DIEGO, CA 92123-2792	
☐ 325 S. MELROSE DR., VISTA, CA 92081-6634 ☐ 500 3RD AVE., CHULA VISTA, CA 91910-5649	
250 E. MAIN ST., EL CAJON, CA 92020-3941	
IN THE MATTER OF	
	A MINOR
APPLICATION FOR A REHEARING OF A MATTER HEARD BY REFEREI (Welfare and Institutions Code § 252, CRC Rule	
(Wellare and institutions code § 252, ONO Nuic	1410)
Based on Order dated,	
I request that a rehearing be granted on the above matter as fol	lows: (Check one)
☐ The entire matter.	
☐ Specifically, that portion of the findings and order as follows:	
My reason(s) for the above request is/are as follows:	
-	
D. (.	
Date:	(Signature)
	(Signature)